SECTION V: 510(K) SUMMARY

Microperforation

Date Prepared: May 12, 2000

JUN 1 4 2000

This 510(k) summary is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR §807.92.

The assigned 510(k) number is: KOO1507

Submitter A.

Smith & Nephew, Inc. **Endoscopy Division** 160 Dascomb Road Andover, MA 01810

В. **Company Contact**

Nicholas Condakes Regulatory Affairs Specialist

C. **Device Name**

Trade Name:

Microperforation Instrument

Common Name:

Rasp

Classification Name: Orthopedic Manual Surgical Instrument

Arthroscope and Accessories

D. Predicate Device

Acufex Meniscal Tissue/Bone Rasp Smith & Nephew Inc., **Endoscopy Division** 130 Forbes Boulevard Mansfield, MA 02048

E. Description of Device

The Microperforation Instrument is a manual, stainless steel, surgical device with a multi-The Microperforation Instrument is available in a concave and convex configuration with small and large sizes. The Instrument is available in sterile or non-sterile packaging configurations.

F. Indications For Use

The Smith & Nephew Microperforation Instrumentation is used to perforate lax connective tissue or bone in orthopedic procedures such as, but not limited to the Medial Collateral Ligament.

G. Comparison of Technological Characteristics

The Smith & Nephew Microperforation Instrument is similar to the predicate device in materials and in safety and effectiveness. The only difference between the new rasp and the predicate device is that the working tip is designed with multi-pointed spikes.

Nicholas Condakes

Regulatory Affairs Specialist

M.Ehle Constellar



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

JUN 1 4 2000

Mr. Nicholas Condakes
Regulatory Affairs Specialist
Smith & Nephew, Inc.
Endoscopy Division
130 Forbes Boulevard
Mansfield, Massachusetts 02048

Re: K001507

Trade Name: Microperforation Instrument

Regulatory Class: I Product Code: LXH Dated: May 12, 2000 Received: May 15, 2000

Dear Mr. Condakes:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

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This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Donne R. Lochner.

Enclosure

510(k) Number :	K001201	
Device Name :	MICROPER FORATION	INSTRUMENT
Indications for U	se:	
		strumentation is used to perforate lax connective tissue out not limited to the Medial Collateral Ligament.
(PLEASE DO W NEEDED)	RITE BELOW THIS LIN	E - CONTINUE ON ANOTHER PAGE IF
Concurrence of C	DRH, Office of Device E	valuation (ODE)
		Division Sign-Off) Division of General Restorative Devices 510(k) Number K001507
Prescription Use (Per 21 CFR 801.	$ \frac{}{109)} $ (Optional Format 1-2-	Over-the-Counter